CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET BG 1

CAMPAIG	N FINANCE REPORT	COVER SHEET PG I				
The C/OH INSTRUCTION this form.	N GUIDE explains how to complete 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:				
3 CANDIDATE/ OFFICEHOLDER	TITLE FIRST RAYMOND , MI	OFFICE USE ONLY				
NAME	NICKNAME LAST ZAVALA	Date Received STY				
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE, ZIP CODE 812 S. Richter	Date Hand-delivered or Date Postmarke®				
Change of Address	SAN ANTONIO, TX 78207	Date hand-delivered 37 Date Frommark 22 2				
5 CAMPAIGN TREASURER	TITLE FIRST RAYMOND	Receipt # Amount				
NAME	NICKNAME LAST ZAVALA SUFFIX	Date Imaged				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE). APT / SUITE #: CITY. STATE: 812 S. Richter SAN ANTONIO, TX 78207	ZIP CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 223-9894					
8 REPORTTYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year Month Day OH /24 /03 THROUGH O6/30					
10 ELECTION	ELECTION DATE Month Day Year 05/03/03 Primary Runoff	General Special				
11 OFFICE	OFFICE HELD (if any) 12 OFFICE SOUGHT (if known	own)				
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by others without the candidates are required to disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose this information only if they receive notification of the disclose the disclose the disclose the disclose this information only if they receive notification of the disclose the disc					
	Address / PO Box: Apt. / Suite #: City: State. Zip Code					
additional pages						
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

JOI FOR	& IOIAL	.5	COVER SHEET PG Z			
14 C/OH NAME RAYMU	n Za	JALA	15 ACCOUNT #(Ethics Commission filers)			
16 NOTICE FROM POLITICAL COMMITTEE(S)	 This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. 					
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	??∩3 CIT			
	GENERAL	COMMITTEE ADDRESS	<u> </u>			
	SPECIFIC		_ ≺აი¢			
additional pages		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS	D: O:			
17 NO REPORTABLE ACTIVITY	Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)					
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -6-			
	1	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS. OR GUARANTEES OF LOANS)	\$ -\$-			
EXPENDITURE TOTALS						
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$					
19 AFFIDAVIT	OU ROOM	I swear, or affirm, under penalty of point is true and correct and includes all in me under Title 15, Election Code.	· · · · · · · · · · · · · · · · · · ·			
	OF TEXAS	Signature of Cardio	hate or Officeholder			
AFFIX NOTARY STAN	PARES PARES	PANNER DAVALA	11-12			
Sworn to and subscrib	bed before me, by 0.23 , to cer	the said <u>LAYMWD</u> <u>2AVALA</u> tify which, witness my hand and seal of office.	this the day			
Mary L Signature of officer and	dir ladi Iministering oath	MARY LOV RODILLOUTZ Printed name of officer administering oath Title	A V TA / L X e of officer administering oath			

exas	Ethics Commission	P.O. Box 12070	Austin, Texas 78711-2070	(512)463-5800	1-800-325-8506
	CANDIDATE DESIGNATIO		OLDER REPORT:	FORM C/O	H-FR
TI	he Instruction Guide Complete only if "	e explains how t Report Type" on	o complete this form. page 1 is marked "Final Report"	••	
1 C	OHNAME RAYMOND	ZAVA	_A	2 ACCOUNT#(Ethi	cs Commission filers)
	a report as a final repor	er political contributions t terminates my cam	s or political expenditures in connection with a paign treasurer appointment. It also undersizes without a campaign treasurer appointment.	stand that I may not accept a	ny campaign
-	ILER WHO IS NOT Complete A & B below				2003 JUL
A	Check only one: I do not have une: I have unexpende convert unexpend also understand to understand that i	xpended contributions d contributions or unex ed political contributio nat I must file an annu terest or income earn must dispose of une	or unexpended interest or income earned from politic spended interest or income earned from politic ins or unexpended interest or income earned al report of unexpended contributions and the ed on political contributions longer than six xpended political contributions and unexper uirements of Election Code, § 254.204.	cal contributions. I understand to no political contributions to pe at I may not retain unexpended years after filing this final repo	that I may not reconfidutions rt. Further, I
8.	. ASSETS				
,	I do retain assets may not convert a	purchased with political purchased with stand that I must dispo	al contributions or interest or other income political contributions or interest or other income from political contributions or interest or other incomes of assets purchased with political contributions.	om political contributions. I und come from political contribution	s to personal
	FFICEHOLDER Complete this section	only if you are an c	officeholder ••	Signature of Candidate	
	l am aware that i re	emain subject to filing r	equirements applicable to an officeholder who	does not have a campaign treas	urer on file.

Signature of Officeholder